



Indiana  
Department of Education  
**Universal Screening  
Toolkit**

Built Upon A  
Neurodevelopmental Culturally  
Responsive Framework



*Infographic created by Dr. Brandie Oliver, 2018*

# **Universal Screening Program**

## **Educator Toolkit**

Overview .....	3
Universal Screening Programs Are For... .....	4
<b>Overall Goals Commonly Associated With Universal Screening Programs</b> .....	4
What Is A Universal Screening? .....	5
<b>Why Is There A Need For Schools To Be Involved?</b> .....	5
How Do Universal Screening Programs Address These Needs?.....	7
THE BENEFITS OF UNIVERSAL SCREENING.....	7
Implementation of A Universal Screening .....	8
Program.....	8
<b>Terminology</b> .....	8
Terms Often Misused.....	8
Readiness .....	10
<b>Developing The Foundation</b> .....	10
<b>Advisory Team Level: Identify Resources &amp; Readiness Checklist</b> .....	13
Details Within the Universal Screening Program .....	15
Universal Screener List.....	18
Universal Screening Tools: Tiers 2 & 3.....	26

## Overview

School-wide, comprehensive, universal screening programming for social, emotional, behavioral, and mental health issues is a practice that has become more prevalent and is now recommended by The National Association of School Psychologists. Universal screening is a commonly used tier one practice to identify students with tier two and three behavioral or mental health needs. This toolkit is intended to provide guidance in implementing a school-wide universal screening program for social, emotional, behavioral, and mental health issues.

“There is a solid and growing empirical base indicating that well-designed, well-implemented, school-based prevention and youth development programming can positively influence a diverse array of social, health, and academic outcomes.”

(National Association of School Psychologists, 2010)

## Universal Screening Programs Are For...

- ▶ Identifying Behavior Problems
- ▶ Identifying Social-Emotional Problems
- ▶ Early Identification of Mental Health Concerns
- ▶ Supporting the Multi-Tiered System (MTSS) of Support Program

## Overall Goals Commonly Associated With Universal Screening Programs

- ✓ Identify students that need social-emotional supports
- ✓ Identify students that traditionally might “fly under the radar” (e.g., demonstrate internalizing behaviors)
- ✓ Reduce the stigma commonly associated with mental health illness
- ✓ Provide training to educators and families about the protective factors, risk factors, and warning signs linked to mental health issues and suicide
- ✓ Provide training to all educators and families about healthy social-emotional development (continuous Social Emotional Learning professional development opportunities provided)
- ✓ Develop and/or expand partnerships with community-based mental health providers

## What Is A Universal Screening?

Universal screening is the systematic examination of all students on academic and/or social-emotional indicators at the beginning of the academic year and at set time periods depending on the school's overall goals. Universal screeners are administered, scored, and interpreted in a short timeframe to allow for timely decision-making, referral, and access to interventions. The overall goal is to keep students from 'falling through the cracks' and to ensure all students receive the level of support and care needed to ensure academic and postsecondary success.

## Why Is There A Need For Schools To Be Involved?

It is important that schools have a strong understanding of the "why" or the data supporting the need of implementing a Universal Screening Program. Multiple resources exist to access data to explore and study the specific needs of the students and families in each community (e.g., [Indiana Department of Education](#), [Indiana Youth Institute Kids Count Book](#), [2015 Youth Risk Behavior Survey](#), etc.). The data below captures the overwhelming critical mental, behavioral, and social-emotional needs of today's students. The rising needs of students cannot be denied, and as the study revealed, many students prefer to receive support at and during school.

# Why Do Schools Need To Be Involved?

Lifetime Prevalence: Approximately 1 in 5 youth aged 13–18 (21.4%) experiences a severe mental disorder at some point during their life. For children aged 8–15, the estimate is 13%.<sup>1</sup>



Annual: 1 in 5 students will experience a significant mental health issue in a given year, most of whom will not receive the help they need due to lack of access to care.<sup>2</sup> Of those who do receive help, approximately 70–80% of those get support in schools.<sup>3</sup>

Another study found, only 45% of youth with a mental health diagnosis receive treatment, and 24% of those individuals receive care in the school system.<sup>4</sup>



Schools offer an optimal environment for prevention, intervention, positive development, and regular communication between school and families. Families and students are familiar with the school community and staff. In fact, students are more likely to seek counseling when services are available in schools.<sup>5</sup> Students seeking these services at school could be due to the significant amount of time students spend at school and school environments where they have the opportunity to develop rapport and establish trust with educators.



Mental and behavioral health problems not only affect students' learning, but also interfere with long-term development of interpersonal relationships and career-related skills.<sup>6</sup>

## References

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*Infographic created by Dr. Brandie Oliver, Butler University (August, 2018)*

# How Do Universal Screening Programs Address These Needs?

## THE BENEFITS OF UNIVERSAL SCREENING

- ▶ Improves outcomes for struggling students
  - When provided accurate supports, students will likely perform better both academically, socially, and behaviorally.
- ▶ Provides relevant, useful data to inform decision-making
  - The data collected can help obtain appropriate and accurate services to students that might have otherwise not received services at that time or possibly ever received services. Additionally, the team reviewing the data collected can work to put systems in place to better support all students --the universal screening program becomes a great tool to better understanding the climate and culture need within the school.
- ▶ Educators gain instruction time
  - As students are identified and seeking appropriate services, classrooms will be functioning more effectively.

School-wide, comprehensive, universal screening programming for social, emotional, behavioral, and mental health issues is a practice that has become more prevalent and is now recommended by The National Association of School Psychologists (NASP, 2010).

# Implementation of a Universal Screening Program

The remaining focus will be dedicated to providing information on considerations when implementing a universal screening program.

## Terminology

### Terminology: Speaking the Same Language

Terminology continuously is an issue within the educational environment. Each new program, policy, and activity seems to come with a new term or acronym. It is critical to take time and clearly articulate the terminology of the school's Universal Screening Program, as well as explain the difference between the below, often confused, terms below.

### Terms Often Misused

#### ***Mental Health or Mental Illness?***

It seems that when many people hear the term, mental health, they actually interpret that as "mental illness," instead of the true meaning which is *absence of problems*. Here are two options for defining Mental Health:

SAMHSA's Center for Mental Health Services: "Mental health is defined as "how a person thinks, feels, and acts when faced with life's situations.... This includes handling stress, relating to other people, and making decisions." This is contrasted with mental health problems and disorders.

Bright Futures in Practice: Mental Health (National Center for Education in Maternal and Child Health) :

Mentally healthy children and adolescents develop the ability to experience a range of emotions (including joy, connectedness, sadness, and anger) in appropriate and constructive ways: possess positive self-esteem and a respect for others; and harbor a deep sense of security and trust in themselves and the world. Mentally healthy children and adolescents are able to function in developmentally appropriate ways in the contexts of self, family, peers, school, and community. Building on a foundation of personal interaction and support, mentally healthy children and adolescents develop the ability to initiate and maintain meaningful relationships (love) and learn to function productively in the world (work).”

### ***Screener or Assessment?***

Screening is characterized by the following:

- ▶ Screenings are not typically designed to diagnose, but instead they are used to identify immediate needs of students and help obtain services OR refer students for further assessment.
- ▶ Screening instruments are typically short in length and do not require a long period of time to administer.
- ▶ Most screening tools do not require an advanced degree to administer, however they may require an advanced degree to interpret and/or score.

Assessment is characterized by the following:

- ▶ An assessment tool is comprehensive and typically considers multiple domains of functioning

- ▶ An assessment is seeking multiple points of information to assist the mental health provider to identify and diagnose--this instrument does seek to diagnose and will be used in the treatment planning phase with the student

This step may seem trivial, but it is important to discuss terminology. Knowing the terms and starting with a shared understanding is imperative to this work. By working from a positive definition of mental health, it will help begin your work to reducing the stigma associated with mental illness. A large portion of the work accompanied with the Universal Screening Program will be educating the staff, families, students, and community.

## Readiness

The decision to adopt and implement a Universal Screening Program must be done with careful consideration of a district's readiness to conduct a universal screening, the ability to effectively analyze and use the resulting data, the capacity to respond to the student need, and the level of knowledge and skills of the educators, students, families, and community members about the social, emotional, behavioral, and mental health development of K-12 students.

### Developing The Foundation

- ▶ Secure District-Level Support
  - Determine the budget
    - Screening tools (some are free) and progress monitoring tools will be an expense that needs to have a budget line item for the program.

- Staff: Will there be any new staff hired to support the anticipated student needs? Will a stipend be paid to any staff person for coordination of the Universal Screening Program?
  - The data collected from the Universal Screening Program will provide a plethora of information. Schools will likely need resources to support students needing services at the various tiers (e.g., small group curriculum, evidence-based programming, etc.). Data gathered may also be used to determine the need for tier 1 social emotional programming, therefore, the budget may need to be spent on this level of programming as well.
- Ensure the school leaders, including the school board, has a clear understanding of the purpose, scope of work, and goals of the implementation of the Universal Screening Program
  - Additionally, know the school's data--need to obtain the 'why' of the school-district and schools within the district
    - What are the biggest needs?
    - What challenges are facing the students and families the school district?
    - What are the mental health needs?
    - What social-emotional needs are impacting the learning environment?

- What are the needs in your community (e.g., opioid epidemic, high poverty, incarcerated parents, etc.) that may be impacting students' mental health and social-emotional development?
- ▶ Establish a Universal Screening Program Advisory Team: It is advised to tap into the existing Multi-Tiered System of Support (MTSS) team because this group of educators is already established and is accustomed to meeting and reviewing data. \*Start with this group to explore if this is a good fit before trying to form a new group.
  - Who do you want on the team? The initial Universal Screening Program Advisory needs to be both a district and building-level team. Once established, then building-level teams do not need to continue to have district level representation unless preferred.
    - District-level administration
    - Building-level administration
    - Student Support Service professional (School Counselor)
    - Teachers (2-3)
    - Family Representation (2-3)
    - Students
    - Community Members (specifically invite community members that will be supporting students in tier 2 and tier 3)
- ▶ Clarify goals

- Identify the purpose of the Universal Screening program (e.g., addressing mental health needs, social-emotional, behavioral, etc.)
- Determine intended outcomes
  - What are the main objectives?
  - What data points does your team want to impact?
  - How will you know the Universal Screening Program was effective?

### **Advisory Team Level: Identify Resources & Readiness Checklist**

- Identify current resources available to support students
- Complete Universal Screening Program readiness checklist
  - Begin to delegate tasks to address the areas that need completed; if the subgroups need to be developed due to the size of the task, discuss appropriate group members, and timeline for task completion
- Create a timeline for the Universal Screening Program
  - Determine anticipated implementation date of 1st screener and the frequency of screening
    - *Parent Measures*: Best to conduct at the beginning of the academic year
    - *Student Self-Measures*: Best to conduct beginning of the academic year (first 2-4 weeks—give time to get acclimated to school environment)
    - *Teacher Measures*: Best to conduct after first 4-6 weeks so educators have had time to get to know students

- ▶ Begin developing a handbook with administrative materials needed for the program (e.g., parent permission forms, student assent forms, teacher checklists, training power points/manuals, Community Referral Guide, etc.)
  - Parent permission forms: It is important to decide whether it will be required to have active or passive consent
    - Active consent requires the parent/guardian returns the permission form back to school before the student can participate. Passive consent is the process of sending home information about the "process" of informing the parents/guardians about the implementation of the universal screening process but it does not require a permission form to be signed and returned for participation. The parent/guardian only needs to sign and return if they do NOT allow for participation.
    - It is best to include this information in the handbook too.
- ▶ Create public relations materials to share the Universal Screening program with staff, parents, community
- ▶ Develop a tentative schedule for screening(s) and team meetings to share school-wide results and discuss student referrals to tier 2 and tier 3 services

# Details Within the Universal Screening Program

## Individual School Preparation

- ▶ Prepare your school for implementation
- ▶ Identify & develop school-level Universal Screening Advisory Team --At the start of the of the academic year, it is suggested to set the tentative schedule for implementation of the screener and meetings to convene to discuss the results
- ▶ Choose a staffing model
- ▶ Select your screening population, location, schedule and questionnaire
- ▶ Develop a referral network and community resource guide (more below)

## Selecting An Evidence-Based Screening Tool

- ▶ It is recommended to select an evidence-based universal screening tool. When considering which screening tool is best for your needs, here are some other important considerations:
- ▶ The tool needs to be valid, adequately normed, reliable, and has social validity -- additionally, it is important to examine the tools carefully to ensure the screening tool matches what you want to assess as well as the developmental level

## Data Collection & Progress Monitoring

- Develop data collection and progress monitoring system
- Designate a point person whose responsibility it is to disseminate the data and any decisions made from the Universal Screening process

- Determine systematic process for using results to inform interventions
- Create a plan and timeline for sharing the screening results and progress monitoring results with staff, families, and community partners

### Educating & Engaging Key Stakeholders

- It is vital to offer adequate training and ongoing professional development to any educator on the Universal Screening program.
- Inform all school staff of the plan to implement the universal screening program early and keep them updated as often as possible. Allow school staff members to ask questions and/or give input as appropriate.
- Present your plans at a faculty meeting and/or department meetings.
- Know your community and share key facts specific to your community with families and community to educate them about the need for screening.
- Present information about Universal Screening program at a school PTA/PTO meetings to raise awareness and build support prior to consent distribution.
- Include information about the Universal Screening program at a table at parent orientations, registration days or back to school nights.
- Make yourself available to answer questions or address concerns about screening .
- Present information in a culturally appropriate manner and anticipate how different cultural groups will respond to screening.
- Developing Referral Network
  - Develop relationships with providers in your community who:

- Evaluate and treat a variety of conditions
- Agree to accept your referrals in a timely manner and do not have long wait lists
- Practice from an equitable, culturally responsive lens
- In developing this list, try to gather information about cost per visit, whether they accept insurance, etc.

### **Next Steps: Referrals & Interventions**

Once the initial universal screening implementation phase is complete, the next step focuses on referrals and interventions. The team meets to review together the results of the screening tool and makes recommendations based on the data.

\*It is important that there was no rush to implementation of the screening tool. The steps outlined above are critical to the success of the program. Having the full understanding and investment of families, students, community, and educators will be a key factor in the success of the program.

# Universal Screener List

*\*This is NOT an exhaustive list.*

SCREENER	DESCRIPTION	AGE RANGE	COST ?	WEBSITE
<b>Behavioral and Emotional Rating Scales (BERS-2)</b>	Designed for use in schools, mental health clinics, juvenile justice settings, and child welfare agencies, the BERS-2 helps to measure the personal strengths and competencies of children ages 5-0 through 18-11 in interpersonal strength, involvement with family, intrapersonal strength, school functioning, affective strength, and career strength.	5-18	Yes	<a href="https://www.proedinc.com/Products/11540/behavioral-and-emotional-rating-scalesecond-edition-bers2.aspx">https://www.proedinc.com/Products/11540/behavioral-and-emotional-rating-scalesecond-edition-bers2.aspx</a>
<b>Behavioral and Emotional Screening System (BESS)</b>	The BESS has a combination of advantages that are not matched by other screening tools: it collects information from three sources: parents, teachers, and youth, it comes with companion assessment tools (Behavior Assessment System for Children-2nd edition (BASC™-3 BESS), includes validity scales to check for response biases, measures strengths in	3-18	Yes	<a href="https://www.pearsonclinical.ca/en/products/product-master.html/item-544">https://www.pearsonclinical.ca/en/products/product-master.html/item-544</a>

	<p>addition to weaknesses, it can be used for children as young as 3 years of age.</p> <p>Assessing the behavioral and emotional functioning of children and adolescents can be an effective tool in promoting student success. Academic problems, along with problems associated with developing and maintaining positive relationships with others, can be the result of underlying behavioral and emotional deficits that, when caught early, can be corrected before negatively affecting a child or adolescent.</p>			
<b>Child and Adolescent Functional Assessment Scale (CAFAS)</b>	<p>Assessing a youth's day-to-day functioning across critical life subscales and for determining whether a youth's functioning improves over time (problem behaviors, strengths, and goals).</p>	5-19 (preschool scale available)	Yes	<a href="http://www2.fasoutcomes.com/Content.aspx?ContentID=12">http://www2.fasoutcomes.com/Content.aspx?ContentID=12</a>
<b>Child and Adolescent Needs and Strengths Assessment-Mental Health (CANS-MH)</b>	<p>CANS-MH could be used as a functional assessment of both the child's and the caregiver's needs and strengths to summarize results of the mental health assessment and guide intervention planning.</p>	Birth through adolescence	No; Tool is Free	<a href="https://praedfoundation.org/tools/the-child-and-adolescent-needs-and-strengths-cans/">https://praedfoundation.org/tools/the-child-and-adolescent-needs-and-strengths-cans/</a>

<b>Child Behavior Checklist (CBCL/6-18)</b>	The school-age assessment forms are the CBCL/6-18, completed by parents or surrogates; the TRF/6-18, completed by teachers and other school staff; and the YSR/11-18 completed by youths.	6-18	Yes	<a href="https://store.aseba.org">https://store.aseba.org</a>
<b>Devereux Student Strengths Assessment (DESSA)</b>	The DESSA Comprehensive SEL System, featuring the Devereux Student Strengths Assessment (DESSA) gives you a turn-key, simple way to quickly screen students to understand their social and emotional strengths and areas for improvement, as well as Growth Strategies and Foundational Practices to make improvements. Gain an accurate picture of each student's social and emotional strengths and needs with the DESSA. Assess your students' SEL skills, then review scores for eight core competencies. These chosen competencies are believed to be the best predictor of a student's overall social and emotional understanding.	K-8 <sup>th</sup> grade	Yes	<a href="http://apertureed.com/dessa-system/">http://apertureed.com/dessa-system/</a>
<b>Devereux Student Strengths Assessment</b>	Screen students in under a minute using the DESSA-mini, a reliable	K-8 <sup>th</sup> grade	Yes	<a href="http://apertureed.com/features-2/universal-screener/">http://apertureed.com/features-2/universal-screener/</a>

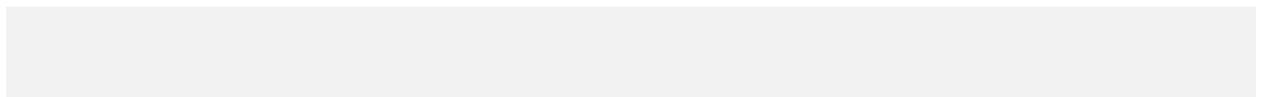
<b>(DESSA-mini)</b>	<p>snapshot assessment of a student’s SEL competency that’s easy to complete for educators, out-of-school time providers, and parents. Once the DESSA-mini has been completed, the DESSA System will interpret the results and reveal which students have social and emotional strengths. You’ll also identify which students have social-emotional difficulties that require further assessment with the DESSA. In addition, use the DESSA System to quickly generate reports. The software helps you understand the progress of individual students and the entire class.</p>			
<b>Global Appraisal of Individual Needs – Short Screener (GAINSS)</b>	<p>Primarily designed for three things: first, it serves as a screener in general populations to quickly and accurately identify clients who would be flagged as having one or more behavioral health disorders on the GAIN-I, suggesting the need for referral to some part of the behavioral health treatment system; it also rules out those who would not be identified</p>	Adolescents and adults	Yes	<a href="http://www.gaincc.org/GAINSS">http://www.gaincc.org/GAINSS</a>

	<p>as having behavioral health disorders. Second, it serves as an easy-to-use quality assurance tool across diverse field-assessment systems for staff with minimal training or direct supervision. Third, it serves as a periodic measure of change over time in behavioral health.</p>			
<p><b>Pediatric Symptom Checklist (PSC)</b></p>	<p>A psychosocial screen designed to facilitate the recognition of cognitive, emotional, and behavioral problems so that appropriate interventions can be initiated as early as possible. Included are two versions, the parent-completed version (PSC) and the youth self-report (Y-PSC).</p>	<p>4-16 (use Y-PSC for ages 11 and up)</p>	<p>Yes</p>	<p><a href="https://www.brightfutures.org/mentalhealth/pdf/professionals/ped_symptom_checklist.pdf">https://www.brightfutures.org/mentalhealth/pdf/professionals/ped_symptom_checklist.pdf</a></p>
<p><b>(RISE™ Assessment) Risk Inventory and Strengths Evaluation</b></p>	<p>Measures high-risk behaviors and psychological strengths The RISE is an all-new rating scale that provides a comprehensive understanding of both high-risk behaviors and psychological strengths across home, school, and community settings. The psychological strengths represent</p>	<p>K-12<sup>th</sup> grade</p>	<p>Yes</p>	<p><a href="https://www.wpspublish.com/store/p/3436/rise-assessment-risk-inventory-and-strengths-evaluation">https://www.wpspublish.com/store/p/3436/rise-assessment-risk-inventory-and-strengths-evaluation</a></p>

	<p>important components of resilience—the quality that enables young people to cope effectively with the stressors and challenges of daily life. Cutoff scores identify high-risk status, prompting clinicians to focus on critical items where safety may be a concern. The RISE Index score compares the individual’s strengths and risk factors, which helps develop a well-informed intervention plan.</p>			
<p><b>Social Skills Improvement System (SSIS™) Performance Screening Guide</b></p>	<p>The SSIS Performance Screening Guide fills the need for a time-efficient, technically sound tool for class-wide screening of key social, motivational, and academic skills. For use with students in preschool through high school, this universal screening instrument helps assess and document the performance level of all students, not just those in greatest need of intervention. The SSIS Performance Screening Guide focuses on observable behaviors in four skill areas:</p> <ul style="list-style-type: none"> <li>● Prosocial</li> </ul>	<p>Pk-12<sup>th</sup>Grade</p>	<p>Yes</p>	<p><a href="https://www.pearsonclinical.com/education/products/100000356/social-skills-improvement-system-ssis-performance-screening-guide.html#tab-details">https://www.pearsonclinical.com/education/products/100000356/social-skills-improvement-system-ssis-performance-screening-guide.html#tab-details</a></p>

	<p>Behaviors</p> <ul style="list-style-type: none"> <li>● Motivation to Learn</li> <li>● Reading Skills</li> <li>● Math Skills</li> </ul>			
<b>Social, Academic, and Emotional Behavior Risk Screener (SAEBRS)</b>	<p>The SAEBRS is a brief tool supported by research for use in universal screening for behavioral and emotional risk. The measure falls within a broad class of highly efficient tools, suitable for teacher use in evaluating and rating all students on common behavioral criteria.<sup>1</sup> The SAEBRS is designed for use in the K-12 setting.</p>	K-12 <sup>th</sup> grade	Yes	<p><a href="http://ebi.missouri.edu/wp-content/uploads/2014/03/EBA-Brief-SAEBRS.pdf">http://ebi.missouri.edu/wp-content/uploads/2014/03/EBA-Brief-SAEBRS.pdf</a></p> <p><a href="http://ebi.missouri.edu/wp-content/uploads/2014/03/SAEBRS-Teacher-Rating-Scale-3.3.14.pdf">http://ebi.missouri.edu/wp-content/uploads/2014/03/SAEBRS-Teacher-Rating-Scale-3.3.14.pdf</a> [actual screener] (Permission granted to photocopy for personal and educational use as long as the names of the creators and the full copyright notice are included in all copies.)</p>
<b>Strength and Difficulties Questionnaire (SDQ)</b>	<p>The Strengths and Difficulties Questionnaire (SDQ) is a brief behavioral screening questionnaire about 3-16 year old children/students. It exists in several versions to meet the needs of researchers, clinicians and educationalists. All versions of the SDQ ask about 25 attributes, some positive and others negative. These 25 items are divided between 5 scales:</p> <ol style="list-style-type: none"> <li>1. emotional symptoms</li> <li>2. conduct problems</li> </ol>	3-16 years	Yes	<p><a href="http://www.sdqinfo.org">http://www.sdqinfo.org</a></p>

	<ul style="list-style-type: none"> <li>3. hyperactivity/inattention</li> <li>4. peer relationship problems</li> <li>5. prosocial behavior</li> </ul>			
<b>Student Behavior Survey</b>	Provides teacher's perspective on student's emotional and behavioral adjustment, academic resources, and social functioning	K-12 <sup>th</sup> grade	Yes	<a href="http://pluto.rbhs.rutgers.edu/vinj/vaid/TestReport.asp?Code=SBS">http://pluto.rbhs.rutgers.edu/vinj/vaid/TestReport.asp?Code=SBS</a>
<b>Student Risk Screening Scale (SRSS)</b>	The Student Risk Screening Scale (SRSS) is a universal screening tool used three times per year to identify students who may be at risk for challenging, antisocial behavior.	Elementary - High School	Yes	<a href="https://miblsi.org/evaluation/student-assessments/student-risk-screening-scale">https://miblsi.org/evaluation/student-assessments/student-risk-screening-scale</a>
<b>Teacher-Child Rating Scale</b>	The Teacher-Child Rating Scale consists of 32 items assessing different aspects of a child's socio-emotional adjustment. Items are grouped into four empirically derived scales assessing the following: 1) Task Orientation, 2) Behavior Control, 3) Assertiveness, and 4) Peer Social Skills.	PK-6 <sup>th</sup> Grade	Yes	<a href="https://www.childrensinstitute.net">https://www.childrensinstitute.net</a>



## Universal Screening Tools: Tiers 2 & 3

SCREENER	DESCRIPTION	AGE RANGE	COST	WEBSITE
<b>Connor's Rating Scales-revised (CRS-R)</b>	An instrument that uses observer ratings and self-report ratings to help assess attention deficit/hyperactivity disorder (ADHD) and evaluate problem behavior in children and adolescents.	3-17; self-report 12-17	Yes	<a href="https://www.pearsonclinical.co.uk/AlliedHealth/Generic/ConnersRatingScales-Revised(CRS-R)/ConnersRatingScales-Revised(CRS-R).aspx">https://www.pearsonclinical.co.uk/AlliedHealth/Generic/ConnersRatingScales-Revised(CRS-R)/ConnersRatingScales-Revised(CRS-R).aspx</a>
<b>Personal Experience Screening Questionnaire</b>	Quick and cost-effective, the PESQ allows routine screening of adolescents for substance abuse	12-18	Yes	<a href="https://www.wpspublish.com/store/p/2909/pesq-personal-experience-screening-questionnaire">https://www.wpspublish.com/store/p/2909/pesq-personal-experience-screening-questionnaire</a>
<b>Child Reaction to Traumatic Events Scale - Revised (CRTES)</b>	Assess psychological responses to stressful life events: arousal, avoidance, and intrusion symptoms	6-18	No; Free Tool	<a href="https://www.nctsn.org/measures/childs-reaction-traumatic-events-scale-revised">https://www.nctsn.org/measures/childs-reaction-traumatic-events-scale-revised</a>
<b>Child Trauma Screening Questionnaire (CTSQ)</b>	The CTSQ assesses for reexperiencing (5 items) and hyperarousal symptoms (5 items). Child version of adult version (TSQ) which has	7-16	Free; Author requests to be informed of the intended use.	<a href="https://www.nctsn.org/measures/child-trauma-screening-questionnaire">https://www.nctsn.org/measures/child-trauma-screening-questionnaire</a>
<b>SCARED Brief Assessment of Anxiety and PTSD Symptoms</b>	Brief assessment of Anxiety and PTSD	7-18	No; Free Tool	<a href="https://adaa.org/living-with-anxiety/ask-and-learn/screenings">https://adaa.org/living-with-anxiety/ask-and-learn/screenings</a>



## **References Used In The Development of the Toolkit**

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